



DERMATOLOGY IN SKIN OF COLOUR

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What is Ethnic Dermatology?

- USA - “Skin of Color”
- (“Skin type IV - VI”)
- African, Asian, Middle-Eastern, Hispanic/Latino descent

Why Ethnic Dermatology?

US Census Bureau 2014 National Projections

By 2060...

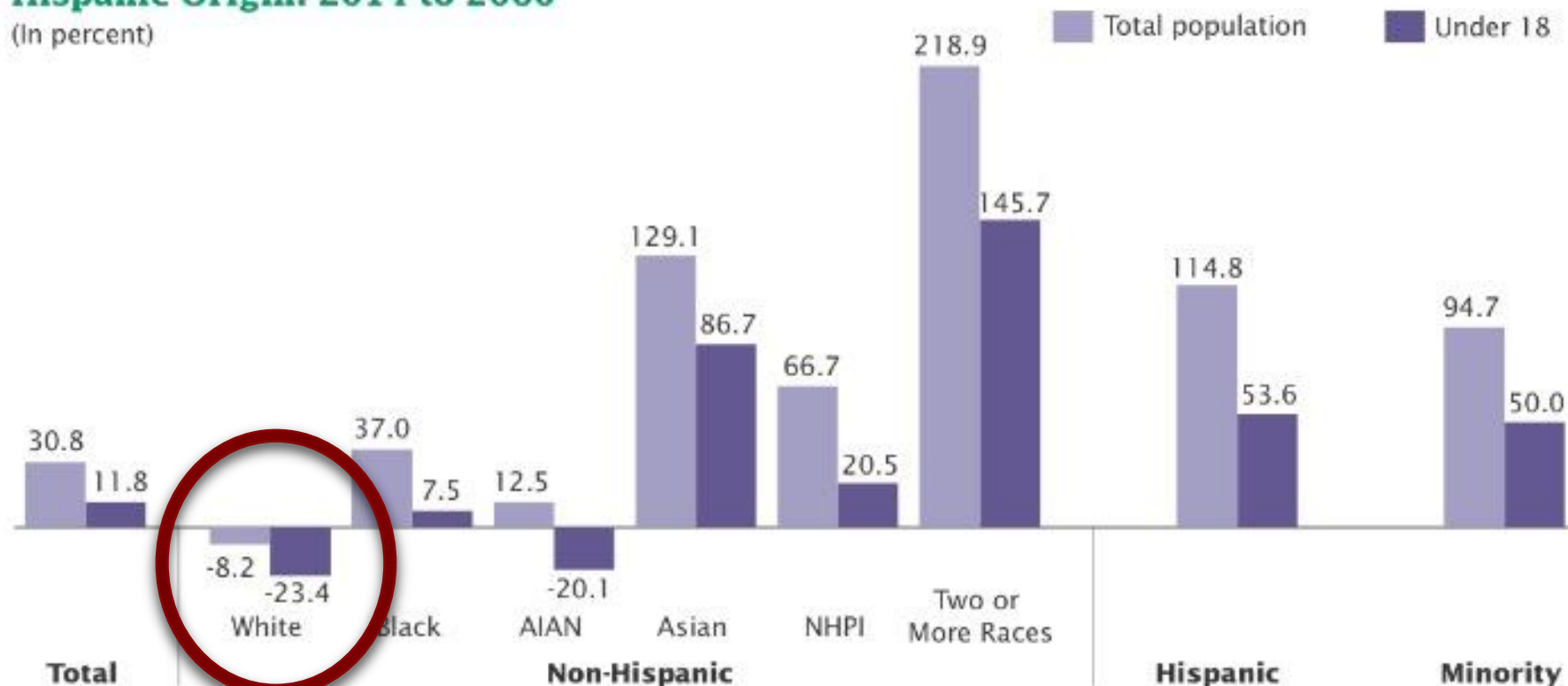
- White population will decrease from 62% - 44%
- Non-white population will increase from 38% - 56%
- Mixed population will increase by 226%
- Asian population will increase by 128%
- **> 50% USA will be non-white**
- “Minority majority” nation

US Census Bureau 2014

Figure 9.

Change in Total Population and Population Under 18 by Race and Hispanic Origin: 2014 to 2060

(In percent)



Note: Unless otherwise specified, the population refers to the non-Hispanic White alone population. Minority refers to everyone other than the non-Hispanic White alone population.
Source: U.S. Census Bureau, 2014 National Projections.

Office for National Statistics, Ethnicity and National Identity in England and Wales 2011

- UK has seen an increase in the non-white population by **61%** between 2001 (8.7%) and 2011 (14%)

UK TREND-EF 2001

Projections

By 2051...

- White population will decrease from 92% - 79%
- BME population will increase from 8-21%
- Mixed population will increase by 148-249%
- Asian population will increase by 95-153%

QUALITY STANDARDS FOR DERMATOLOGY

PROVIDING THE RIGHT CARE FOR PEOPLE WITH SKIN CONDITIONS



Many people with skin conditions (such as those undergoing phototherapy) need to attend dermatology treatment services two or three times a week for several weeks, which makes public and/or patient transport services particularly important.

The location of services and the types of premises used to deliver dermatology services should be informed by findings from a healthcare needs assessment and by service user feedback of their experience.⁶

1.1.9 Services for children and young people

Services for children should be child centred and provided in a child-friendly environment with appropriately trained staff.¹¹ Integrated care pathways should be established and due consideration should be given to planning transitional care for young people progressing to adult services.

Rationale

Children and young people have specific needs. To ensure these are met, all healthcare professionals who work with children and young people with skin conditions should be appropriately trained and consideration should be given to the correct clinical environment and facilities. Services should take account of the principles outlined in the National Service Framework for Children, Young People and Maternity Services: Core Standards.¹¹

1.1.10 Expertise on skin disease in ethnic groups

All services should have knowledge of the ways some skin diseases can affect ethnic groups differently. If the relevant expertise is not available to treat specific patients locally, it is important that there is access to services that can do so.

Rationale

Over 6.5% of the UK population belong to a minority ethnic group. Skin diseases manifest in and affect the skin of various ethnic groups differently and expertise is needed to assess and meet differing needs.

Salam A, Dadzie O. Dermatology training in the U.K.: does it reflect the changing demographics of our population? Br J Dermatol. 2013 Dec;169(6):1360-2.

- 95% acknowledged unique/specific dermatological conditions in ethnic skin
- 4% had ethnic dermatology clinics as part of their training
- 22% had formal teaching session
- 49% felt they would be competent in treating UK's ethnic population at end of training
- 71% felt ethnic dermatology should be incorporated into curriculum

Cosmetic dermatology in skin
of colour?

Top dermatology conditions in skin of colour

- Acne, unspecified dermatitis or eczema, seborrhoeic dermatitis, Atopic dermatitis, **dyschromia**

Davis SA et al. Top dermatologic conditions in patients of color: an analysis of nationally representative data. J Drugs Dermatol. 2012;11(4):466-73

- Acne, **dyschromia**, contact dermatitis/eczema, alopecia, seborrhoeic dermatitis

Alexis AF et al. Common dermatologic disorders in skin of color: a comparative practice survey. Cutis 2007;80(5):387-94

- Dry skin, hair loss, **uneven skin tone, dark spots**, acne

Shah SK et al. A survey of skin conditions and concerns in South Asian Americans: a community-based study. J Drugs Dermatol. 2011;10(5):524-8

TABLE 1. Worldwide prevalence of pigmentary disorders (excluding vitiligo) in skin of color

AUTHOR	YEAR	STUDY POPULATION	PREVALENCE	RANK	LOCATION
Halder ²	1980–1983	2,550: 78.4% African Americans, 21.6% Caucasian	9% black; 1.7% white	3/13 black, 7/10 white	Washington, DC
Chua-Ty ⁴	1989–1990	74,589: 77.2% Chinese, 9.9% Indian, 7.6% Malay, 5.3% Other	1.8% Chinese, 2.7% Malay, 2.3% Indian, 1.2% other	10/10	Singapore
Nanda ¹¹⁶	1992–1996	10,000: 88% Kuwaitis, 8% other Arabs, 4% non-Arabs; all children	0.42%	33/74	Kuwait
Child ¹¹⁷	1996	461: black (African, Afro-Caribbean, mixed race); 187 children, 274 adults	1.6% children, 3.4% adults	8/14 children, 7/29 adults	London, England
Hartshorne ¹¹⁸	1999	7,029: 76.1% black, 10.9% Caucasian, 6.7% Indian, 6.1% colored (mixed race)	0.7% black, 0.1% Caucasian, 0.3% Indian, 0.5% colored (mixed race)	22/91 overall	Johannesburg, South Africa
Dunwell ¹¹⁹	2001	1,000: 95.6% Afro-Caribbean, 0.8% Caucasian, 2.2% Indian, 1.4% Chinese	22.8%* (includes PIH, melasma, solar lentigines)	3/18	Kinross, Jamaica
Sanchez ¹²⁰	Published 2003	3,000: Latino (1,000 private practice, 2,000 hospital-based clinic)	6% private practice, 7.5% hospital-based clinic	7/12 private, 6/12 hospital	New York, New York
Arsouze ¹²¹	2004	1,064: black (African, Afro-Caribbean; FST V and VI); 228 children, 836 adults	6.1% children, 9.2% adults	6/16 children, 2/20 adults	Paris, France
Alexis ¹	2004–2005	1,074: black and white	19.9% of diagnoses in blacks [†] , not in whites	2/14	New York, New York
El-Essawi ¹²²	Published 2007	401: Arab Americans (33.7% Lebanese descent)	56.4% uneven skin tone, 55.9% skin discoloration	Top 2 skin concerns out of 10	Detroit, Michigan

*Data not separated by race/ethnicity

[†]Subsequent visits by the same patient were included in the data pool

PIH = Postinflammatory hyperpigmentation

FST = Fitzpatrick skin types

TOP 5



- The top five cosmetic surgical procedures in 2015 were:**

Liposuction (396,048 procedures)
Breast Augmentation (305,856 procedures)
Tummy Tuck (180,717 procedures)
Eyelid Surgery (169,708 procedures)
Breast Lift (148,967 procedures)



- The top five nonsurgical procedures in 2015 were:**

Botulinum Toxin (4,267,038 procedures)
Hyaluronic Acid (2,148,326 procedures)
Hair Removal (1,136,834 procedures)
Chemical Peel (603,305 procedures)
Microdermabrasion (557,690 procedures)

GENDER



- The top five surgical procedures for women in 2015 were:**

Liposuction, Breast Augmentation, Tummy Tuck, Breast Lift and Eyelid Surgery. **Women had more than 11.5 million cosmetic procedures, 90.5% of the total.** The number of cosmetic procedures performed among women **increased over 538%** from 1997, when this survey was initiated by ASAPS.



- The top five surgical procedures for men in 2015 were:**

Liposuction, Nose Surgery, Eyelid Surgery, Male Breast Reduction and Facelift. **Men had more than 1.2 million procedures performed, (9.5% of the total).** The number of cosmetic procedures performed among men has **increased over 325%** from 1997, when this survey was initiated by ASAPS.



AGE / RACE



- People age 35-50 had the most procedures performed (over 5.1 million accounting for 40.4% of the total).**

Age 51-64 = 30.2%
Age 19-34 = 17.5%
65 and over = 10.2%
Age 18 and under = 1.7%

- The most common surgical procedures per age group were:**

18 and under = Ear Surgery
19-34 = Breast Augmentation
35-50 = Liposuction
51-64 = Liposuction
65 and over = Eyelid Surgery

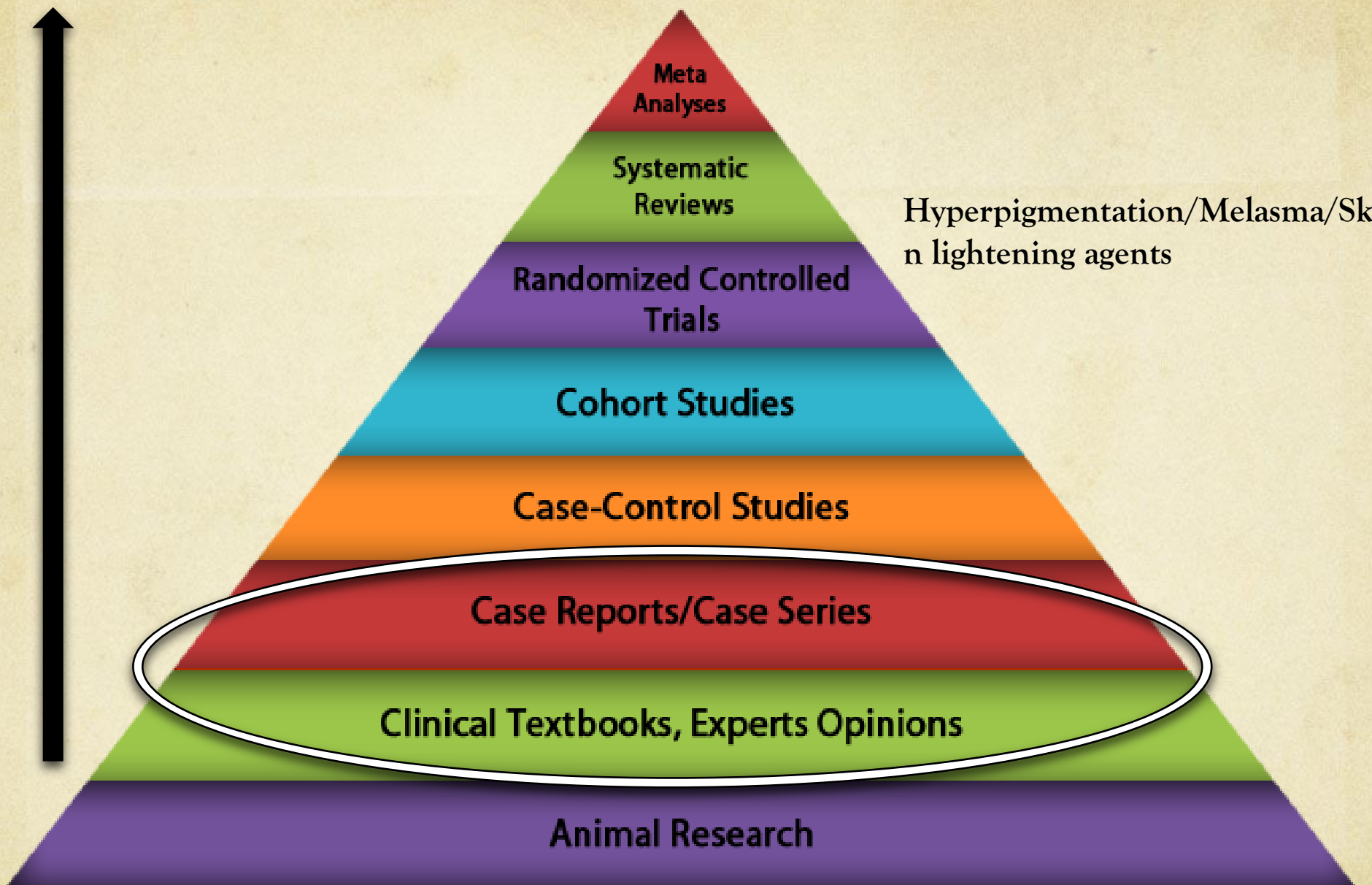


- Racial and ethnic minorities had approximately 25% of all cosmetic procedures, up 3% from last year:**

African-Americans (7.7%)
Asians (6.2%)
Hispanics (9.7%)
other non-Caucasians (1.3%)

Source: American Society for Aesthetic Plastic Surgery

Ethnic dermatology research?



Ethnic dermatology resources?



FOLLICULAR DISORDERS

- Pseudofolliculitis barbae
- Acne keloidalis nuchae
- Folliculitis decalvans
- Dissecting cellulitis

HYPERPIGMENTATION

- Post-inflammatory hyperpigmentation
- Periorbital dark circles
- Melasma
- Macular amyloidosis
- Exogenous ochronosis
- Naevus of Ito/Ota

SKIN LIGHTENING/SKIN BLEACHING

KELOIDS

HAIR AND SCALP DISORDERS

- Traction alopecia
- Central centrifugal cicatricial alopecia
- Acquired trichorrhexis nodosa
- Tinea capitis

OTHER...

((("african continental ancestry group"[MeSH Terms] OR "african americans"[MeSH Terms] OR "asian continental ancestry group"[MeSH Terms] OR african[TW] OR africans[TW] OR asian[TW] OR asians[TW] OR hispanic[TW] OR hispanics[TW] OR afro-caribbean[TW] OR afro-caribbeans[TW] OR afrocaribbean[TW] OR afrocaribbeans[TW] OR nonwhite[TW] OR nonwhites[TW] OR "non white"[TW] OR "non whites"[TW] OR "non caucasian"[TW] OR "non caucasians"[TW] OR black[TI] OR blacks[TW] OR colored[TI] OR coloured[TI] OR ethnic[TI]) AND ("skin"[MeSH Terms] OR skin[TW] OR skins[TW] OR skinned[TW] OR dermatology[TW] OR dermatologic[TW] OR "acne keloid"[MeSH Terms] OR keloid[TW] OR keloids[TW] OR keloidal[TW] OR "acne vulgaris"[MeSH Terms] OR acne[TW] OR "melanosis"[MeSH Terms] OR melanonychia OR "melanoma"[MeSH Terms] OR melanoma[TW] OR "skin neoplasms"[MeSH Terms] OR "skin cancer"[TW] OR lichenif*[TW] OR hypertrophic[TW] OR hypertrophy[TW] OR hypopigment*[TW] OR hyperpigment*[TW] OR subungual[TW] OR hydroquinone[TW])) OR "skin of color" OR "skin of colour" OR "black skin" OR "black skins" OR "black skinned" OR "colored skin" OR "coloured skin" OR "dark skin" OR "dark skins" OR "dark skinned" OR "darker skin" OR "darker skins" OR "darker skinned" OR "pigmented skin" OR "pigmented skins" OR "ethnic skin" OR "asian skin" OR "african skin" OR "ethnic hair" OR (hair[TW] AND afro) OR (hair[TW] AND african[TW]) OR "trichorrhexis nodosa" OR "traction alopecia" OR "hot comb" OR "pseudofolliculitis barbae" OR "Pseudofolliculitis Barbae"[Supplementary Concept] OR "folliculitis keloidalis" OR "folliculitis decalvans" OR "acne keloidalis" OR "dissecting cellulitis" OR "central centrifugal cicatricial alopecia" OR melasma[TW] OR "post-inflammatory hyperpigmentation" OR "postinflammatory hyperpigmentation" OR (kitamura[TW] AND (reticulate OR acropigmentation)) OR "dermatosis papulosa nigra" OR "palmoplantar keratoderma" OR "keratosis punctata" OR "punctate keratosis" OR "focal acral hyperkeratosis" OR "acrokeratoelastoidosis" OR "marginal keratoderma" OR "punctate keratoderma" OR "primary cutaneous amyloidosis" OR "lichen amyloidosis" OR "macular amyloidosis" OR "facial afro-caribbean childhood eruption" OR "actinic prurigo" OR "prayer nodule" OR "nevus of ota" OR "naevus of ota" OR "nevus of ito" OR "naevus of ito" OR "acral lentiginous melanoma" OR "progressive macular hypomelanosis" OR "idiopathic guttate hypomelanosis" OR (confetti AND (leukoderma[TW] OR depigmentation[TW])) OR "ochronosis" OR "mongolian blue spot" OR "dark circles" OR "skin lightening" OR "skin-lightening" OR "skin lightener" OR "skin-lightener" OR "skin lighteners" OR "skin-lighteners" OR (bleaching AND skin[TW]) OR (depigmenting AND skin[TW]) OR (depigmentation[TW] AND skin[TW]) OR "bleaching cream" OR "bleaching creams") AND (systematic[sb] OR "systematic review"[All Fields])

Centre of Evidence Based Dermatology Skin of Colour resource

<http://www.nottingham.ac.uk/research/groups/cebd/resources/index.aspx>